

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2	/					
3		/				
4	/					
5		/				
6	/					
7	/					
8		0				
9	/					
10	/					
11		/				
12	/					
13		1				
14	/					
15		5				
16		5				
17		5				
18		0				
19		0				
20		5				
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49						
50						
TOTAL IND.		13				
TOTAL DEP.		40				
TOTAL C:AIMC	53					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS